

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER NO ON PROP 10; CALIFORNIANS FOR RESPONSIBLE HOUSING, A COALITION OF VETERANS, SENIORS, HOUSING PROVIDERS, SOCIAL JUSTICE GROUPS, TAXPAYER ASSOCIATIONS, AND AREA CODE/PHONE NUMBER (415)389-6800 I.D. NUMBER (if applicable) 1401516 STREET ADDRESS CITY SAN RAFAEL STATE CA ZIP CODE 94901			Date of This Filing 09/21/2018 Report No. LCR # 749 <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages 5	Date Stamp Page 1 of 5	CALIFORNIA FORM 497 For Official Use Only
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Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/20/2018	AMI REAL ESTATE, INC. Los Angeles, CA 90048	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
09/20/2018	CALIFORNIA ASSOCIATION OF REALTORS ISSUES MOBILIZATION POLITICAL ACTION COMMITTEE (IMPAC) Los Angeles, CA 90020 ID# 782560	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,750,000.00
09/20/2018	EQUITY RESIDENTIAL Chicago, IL 60606	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,862,450.00

*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

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09/20/2018	LINDA ERKELENS San Francisco, CA 94107	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER SELF-EMPLOYED; LINDA ERKELENS	\$10,000.00
09/20/2018	JOHN JAEGER Clarendon Hills, IL 60514	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INVESTMENT SALES CBRE, INC.	\$2,500.00
09/20/2018	MITCHELL KIFFE Great Falls, VA 22066	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE CBRE, INC.	\$2,500.00

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I.D. NUMBER (if applicable) 1401516								
STREET ADDRESS								
CITY SAN RAFAEL			STATE CA		ZIP CODE 94901			

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09/20/2018	JOSHUA MCDONALD Vancouver, WA 98660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BROKER CBRE	\$2,000.00
09/20/2018	PHIL OESTER Portland, OR 97209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BROKER CBRE	\$2,000.00
09/20/2018	ISAAC PACHULSKI Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY PACHULSKI STANG	\$1,000.00

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AREA CODE/PHONE NUMBER (415)389-6800	I.D. NUMBER (if applicable) 1401516	Report No. LCR # 749			
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)			
CITY SAN RAFAEL	STATE CA	ZIP CODE 94901	No. of Pages 5		

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09/20/2018	RENTSFNOW, INC. San Francisco, CA 94104	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
09/20/2018	STANFORD PROPERTIES, INC. San Jose, CA 95122	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$24,000.00
09/20/2018	VAN TILBURG, BANVARD & SODERBERGH, AIA Santa Monica, CA 90404	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00

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STREET ADDRESS

CITY
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(explain below)

No. of Pages
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Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: